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## **UTILITY PATENT APPLICATION TRANSMITTAL**

Address to: <b>Box PATENT APPLICATION</b> Commissioner of Patents  P.O. Box 1450  Alexandria, VA 22313-1450					Attorney Docke	et No.	YUEH3009/EM	P TO			
					First Named In (or identifier)	ventor	Ching YUEH	J.S. F			
					Total Pages		16	16834			
Transmitted herewith is a patent application under 37 CFR 1.53(b).											
Entitled: Stan			Lamp With Horizontally Rotatable Lamp Units								
×	1.	Submitted herewith are the following:									
		6 pages of specification, including claims and Abstract. 3 sheets of FORMAL drawings (Figs. 1-4). 3 claims. 1 Oath/Declaration signed by each inventor. 1 Application Data Sheet. 1 Assignment of the invention to Test Rite International Company, LTD, Taipei, Taiwan, R.O.C.,  Cover Sheet, and payment of the \$40 recordal fee. 1 check in the amount of \$810 (\$770- Filing Fee; \$40- Assignment Recordation Fee).									
	2.	SMALL ENTITY STATUS IS ASSERTED pursuant to 37 CFR 1.27 for this application.									
×	3.	The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.									
	4.	Insert before the first sentence of the specification: This application claims the benefit of provisional application number filed									
	5.	Insert before the first sentence of the specification: - This application is a Continuation-in-part of nonprovisional application number filed									
	6.	Other:									
The registered practitioners representing applicant(s) are J. Ernest Kenney, Reg. No. 19,179; Eugene Mar, Reg. No. 25,893; Richard E. Fichter, Reg. No. 26,382; Thomas J. Moore, Reg. No. 28,974; Joseph DeBenedictis, Reg. No. 28,502; and Benjamin E. Urcia, Reg. No. 33,805.											
THE FILING FEE IS CALCULATED AS FOLLOWS: Basic Fee:											
Total Claims: 3				- 20 =		0	X \$18 =	\$0.00			
Independent Claims: 1 - 3 =			- 3 =		0	X \$86 =	\$0.00				
Correspondence Address: BACON & THOMAS, PLLC 625 Slaters Lane, 4 <sup>th</sup> Floor Alexandria, VA 22314-1176				Multiple Dependent Claim (add \$290.00):		\$0.00					
				CUSTOMER NUM	1BER	Subtotal:		\$770.00 \$0.00			
						50% Reduction if Small Entity Status:					
Phone: 703-683-0500 Fax					)3-683-1080	<u> </u>	\$770.00				
Date:			Name:		Signature:		Reg. No.				
January 28, 2004		28, 2004	<u> </u>	Richard E. Fichter				26,382			